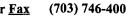
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUL FEE **Commissioner for Patents** P.O. Box 1450 Alexandria, Virginia 22313-1450



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appropriate. All further cor indicated unless corrected t maintenance fee notification	below or directed otherwis	Patent, advance or e in Block 1, by (a	ders and notification specifying a new	n of maintenance fees correspondence address	will be mailed; and/or (b) in	to the current dicating a sepa	correspondence address trate "FEE ADDRESS"	
* CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1) 05514 7590 10/22/2003				Note: A certificate of mailing can only be used for domestic mailings of Fee(s) Transmittal. This certificate cannot be used for any other accompany papers. Each additional paper, such as an assignment or formal drawing, m have its own certificate of mailing or transmission.				
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JAN 1 5 2004 H					(Signat			
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APPLICATION NO.	FILING DATE	RADEMBAR	FIRST NAMED INVE	NTOR	ATTORNEY	DOCKET NO.	CONFIRMATION NO.	
09/865,454	05/29/2001		Shigeyuki Uzav	va	862.C2238		3754	
TITLE OF INVENTION: E MAINTAINING EXPOSUR		, DEVICE MANUI	FACTURING MET	HOD, SEMICONDUCT	TOR MANUFA	ACTURING PI	LANT AND METHOD	
APPLN, TYPE	SMALL ENTITY	ISSUE F	EE I	PUBLICATION FEE	TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	NO	\$1330)	\$300	\$1630		01/22/2004	
EXAMINER		ART UN	IIT (CLASS-SUBCLASS]			
STEVENSON, ANDRE C		2812	2812 355-053000		-			
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Address form PTO/SB/122) attached. firm (having as				natively, (2) the name a member a registered	of a single attorney or	HARPER	& SCINTO	
☐ "Fee Address" indication	on (or "Fee Address" Indictor more recent) attached. U	agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME AND	RESIDENCE DATA TO	BE PRINTED ON T	THE PATENT (print	or type)		· · · · · · · · · · · · · · · · · · ·	•	
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CANON KABUSHIKI KAISHA				Tokyo, JAPAN				
Please check the appropriate assignee category or categories (will not be printed on the patent);								
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XX Issue Fee XX A check in the amount of the fee(s) is enclosed.								
Publication Fee Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copiesfive (5) The Director is hereby authorized by charge the required fee(s), or credit any overpayment								
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(Authorized Signature)	Went . ()	(Date)			***			
Steven E. Warner, Reg. No. 33,326 01/15/2004				01/16/2004 MGEBREM2 00000043 09865454				
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